

State Water Resources Control Board
Division of Drinking Water

April 16, 2015
System No.: 1503209

Superior Mutual Water Company
Mr. Waymond Howze, Vice President
19066 Beech Avenue
Shafter, CA 93263

RE: Citation No. 03-12-15C-004
Violation of Title 22, California Code of Regulations, Section 64426.1,
For March 2015

Dear Mr. Howze:

Enclosed is a Citation issued to the Superior Mutual Water Company (Water System) public water system. The Water System will be billed at the Division's hourly rate (currently estimated at \$126.00) for the time spent on issuing this Citation. The California Health and Safety Code Section 116577 provides that a public water system must reimburse the Division for actual costs incurred by the Division for specified enforcement actions, including but not limited to, preparing, issuing and monitoring compliance with a citation.

The Water System will receive a bill sent from the Division of Drinking Water Fee Billing Unit in August of the next fiscal year. This bill will contain fees for any enforcement time spent on this Water System for the current fiscal year.

If you have any questions regarding this letter and the enclosed citation, please contact Eli McFarland or me at (559) 447-3300.

Sincerely,



Tricia A. Wathen, P.E.
Senior Sanitary Engineer, Visalia District
SOUTHERN CALIFORNIA BRANCH
DRINKING WATER FIELD OPERATIONS

TAW/LR
Enclosures
cc: Kern County Environmental Health Department

1
2
3
4 CALIFORNIA
5 STATE WATER RESOURCES CONTROL BOARD
6 DIVISION OF DRINKING WATER
7

8 TO: Superior Mutual Water Company
9 ATTN: Mr. Waymond Howze, Vice President
10 19066 Beech Avenue
11 Shafter, CA 93263
12

13 CITATION NO. 03_12_15C_004

14 FOR
15 VIOLATION OF HEALTH AND SAFETY CODE SECTION 116650(a)
16 AND THE PRIMARY DRINKING WATER STANDARD FOR TOTAL COLIFORM
17 Dated April 16, 2015

18 The State Water Resources Control Board (hereinafter "Board"), acting by and through its
19 Division of Drinking Water (hereinafter "Division") and the Deputy Director for the Division
20 (hereinafter "Deputy Director"), hereby issues this citation (hereinafter "Citation"), pursuant
21 to Section 116650 of the California Health and Safety Code (hereinafter "CHSC") to
22 Superior Mutual Water Company (hereinafter "Water System") for violation of CHSC section
23 116550(a) and Title 22, California Code of Regulations (hereinafter "CCR"), Section
24 64426.1.
25
26
27

APPLICABLE AUTHORITIES

CHSC, Section 116550 states in relevant part:

- (a) If the department determines that a public water system is in violation of this chapter or any regulation, permit, standard, citation, or order issued or adopted thereunder, the department may issue a citation to the public water system. The citation shall be served upon the public water system personally or by certified mail. Service shall be deemed effective as of the date of personal service or the date of receipt of the certified mail. If a person to whom a citation is directed refuses to accept delivery of the certified mail, the date of service shall be deemed to be the date of mailing.
- (b) Each citation shall be in writing and shall describe the nature of the violation or violations, including a reference to the statutory provision, standard, order, citation, permit, or regulation alleged to have been violated.
- (c) A citation may specify a date for elimination or correction of the condition constituting the violation.
- (d) A citation may include the assessment of a penalty as specified in subdivision (e).
- (e) The department may assess a penalty in an amount not to exceed one thousand dollars (\$1,000) per day for each day that a violation occurred, and for each day that a violation continues to occur. A separate penalty may be assessed for each violation.

Title 22, CCR, Section 64421 (hereinafter "Section 64421"), states in relevant part:

Section 64421

- (a) Each water supplier shall:

...

- (5) Comply with the Maximum Contaminant Level as required in §64426.1.

Title 22, CCR Section 64426.1 (hereinafter "Section 64426.1") provides in relevant part:

Section 64426.1: Total Coliform Maximum Contaminant Level (MCL).

...

- (b) A public water system is in violation of the total coliform MCL when any of the following occurs:

- (1) For a public water system which collects at least 40 samples per month, more than 5.0 percent of the samples collected during any month are total coliform-positive; or
- (2) For a public water system which collects fewer than 40 samples per month, more than one sample collected during any month is total coliform-positive; or
- (3) Any repeat sample is fecal coliform-positive or E. coli-positive; or
- (4) Any repeat sample following a fecal coliform-positive or E. coli-positive routine sample is total coliform-positive.

STATEMENT OF FACTS

The Water System is a nontransient noncommunity water system that serves a nontransient population of approximately 560 persons via 37 commercial service connections. The Water System also supplies water to a residential population of approximately 17 persons through 9 service connections.

The Water System is required to collect a minimum of 1 distribution system bacteriological samples per month. The bacteriological water analysis results submitted by the Water System reported the presence of total coliform bacteria in 5 of 10 samples collected by the Water System in March 2015. None of the positive samples showed the presence of fecal coliform or *E. coli* bacteria.

In response to the presence of total coliform bacteria in 5 routine samples collected on March 4, 2015, a total of 5 repeat samples were collected in follow up on March 9, 2015 after emergency chlorination of the water delivered to the distribution system was conducted. None of the repeat samples showed the presence of total coliform bacteria. The five routine samples were required due to the presence of total coliform bacteria in a sample collected in February 2015. All water samples for coliform bacteria collected during February and March 2015 are summarized in Attachment A.

The cause of the failure is inconclusive based on the investigation conducted by the Water System (see Attachment B). Continuous disinfection of the distribution system is not provided at the present time. The Water System's well was sampled on March 6, 2015 in compliance with the Groundwater Rule and the analytical results did not detect the presence of total coliform bacteria. All source water samples for coliform bacteria collected for February and March 2015 are summarized in Attachment C.

1 Public notification to the Division and consumers of a water system is required whenever a
2 violation of the Total Coliform MCL occurs. The Division was notified on March 5, 2015, in
3 accordance with the above referenced section
4

5 Public notification to the customers of the Water System was conducted on March 9, 2015,
6 advising each customer of the failure of the total coliform MCL during the month of March
7 2015. A copy of the notice that was directly delivered to each customer is provided as
8 Attachment D. Proof of Notification is provided as Attachment E.
9

10 **DETERMINATION**

11 Based on the above Statement of Facts, the Division has determined that the Water System
12 has violated CHSC, Section 116550 and Section 64426.1 in that the water produced by the
13 Water System failed to comply with Title 22, CCR, Section 64426.1, Total Coliform MCL for
14 the month of March 2015 due to the presence of total coliform bacteria in 5 of 10 samples
15 collected in March 2015.
16

17 **DIRECTIVES**

18 Water System is hereby directed to take the following actions:
19

- 20 1. Comply with Title 22, CCR, Section 64426.1, in all future monitoring periods.
21
- 22 2. Whenever the Water System has one or more total coliform positive samples in a
23 given month, at least five (5) routine samples shall be collected the following month.
24 The Water System shall collect 5 routine samples for total coliform analysis during the
25 month of April 2015.
26
27

1 All submittals required by this Citation shall be addressed to:

2 Tricia Wathen, Senior Sanitary Engineer
3 State Water Resources Control Board
4 Division of Drinking Water, Visalia District
5 265 W. Bullard Ave, Suite 101
6 Fresno, CA 93704

7 As used in this Citation, the date of issuance shall be the date of this Citation; and the date
8 of service shall be the date of service of this Citation, personal or by certified mail, on the
9 Water System.

10 The Division reserves the right to make such modifications to the Citation as it may deem
11 necessary and/or to issue such further citation(s) as it may deem necessary to protect public
12 health and safety. Such modifications may be issued as amendments to this Citation and
13 shall be effective upon issuance.
14

15 Nothing in this Citation relieves Water System of its obligation to meet the requirements of
16 the California SDWA, or any regulation, standard, permit or order issued thereunder.
17

18 **PARTIES BOUND**

19 This Citation shall apply to and be binding upon Superior Mutual Water Company, its
20 owners, shareholders, officers, directors, agents, employees, contractors, successors, and
21 assignees.
22

23 **SEVERABILITY**

24 The Directives of this Citation are severable, and Water System shall comply with each and
25 every provision hereof, notwithstanding the effectiveness of any other provision.
26
27

FURTHER ENFORCEMENT ACTION

The California SDWA authorizes the Board to: issue a citation with assessment of administrative penalties to a public water system for violation or continued violation of the requirements of the California SDWA or any regulation, permit, standard, citation, or order issued or adopted thereunder including, but not limited to, failure to correct a violation identified in a citation or compliance order. The California SDWA also authorizes the Board to take action to suspend or revoke a permit that has been issued to a public water system if the public water system has violated applicable law or regulations or has failed to comply with an order of the Board; and to petition the superior court to take various enforcement measures against a public water system that has failed to comply with an order of the Board. The Board does not waive any further enforcement action by issuance of this Order.

Date

April 16, 2015Tricia A. Wathen

Tricia Wathen, P.E.
Senior Sanitary Engineer, Visalia District
DRINKING WATER FIELD OPERATIONS BRANCH

Certified Mail No. 7014 3490 0001 7868 8811

Cc: Seaco Technologies, Inc., 3220 Patton Way, Bakersfield, CA 93308

Email cc to: Ms. Maria Carmen, CA Public Utilities Commission at

mariacarmen.rocha@cpuc.ca.gov

TW/LR

Attachments:

Attachment A: Summary of Distribution Bacteriological Samples for February and March 2015

Attachment B: Positive Total Coliform Investigation report

Attachment C: Summary of Source Bacteriological Samples for February and March 2015

Attachment D: Public Notice template

Attachment E: Proof of Notification Form

Bacteriological Distribution Monitoring Report

1503209 Superior Mutual Water Company

Distribution System Freq: 1/M

Sample Date	Location	T Coli	E Coli	F Coli	HPC	Type	Cl2	Cl2 Avg	Viol. Type	GWR Satisfied?	Comments
3/9/2015	31110 7th Standard Rd.	A	A			Repeat					
3/9/2015	9309 Enos Lane	A	A			Routine					
3/9/2015	19474 Enos Lane	A	A			Repeat					
3/9/2015	9483 Enos Lane	A	A			Repeat					
3/9/2015	9521 Enos Lane	A	A			Repeat					
3/4/2015	31110 7th Standard Rd.	P	A			Routine					
3/4/2015	9309 Enos Lane	P	A			Routine					
3/4/2015	9474 Enos Lane	A	A			Routine					
3/4/2015	9483 Enos Lane	P	A			Routine					
3/4/2015	9521 Enos Lane	P	A			Routine					
2/9/2015	19066 Beech Ave.	A	A			Repeat					
2/9/2015	9483 Enos Ln.	A	A			Repeat					
2/9/2015	9309 Enos Ln.	A	A			Repeat					
2/5/2015	9483 Enos Ln.	P	A			Routine					
1/8/2015	19066 Beech Ave	A	A			Routine					

Violation Key

MCL	Exceeds the maximum contaminant level	MR5	Incorrect number of repeat samples as follow-up to a positive sample
MR1	No monthly sample for the report month	MR6	No source sample
MR2	No quarterly sample for the report month	MR7	No summary report submitted
MR3	Incorrect number of routine samples for the report month	MR8	Other comments and/or info
MR4	Did not collect 5 routine samples for previous month's positive sample	MR9	Cl2 not reported

POSITIVE TOTAL COLIFORM INVESTIGATION

Simple Well with Pressure Tank Systems

This form is intended to assist public water systems in completing the investigation required by the Division of Drinking Water (Section 64426(b) of Title 22, California Code of Regulations) and may be modified to take into account conditions unique to the system.

ADMINISTRATIVE INFORMATION

PWS Name:	Superior Mutual Water	PWSID NUMBER:	1503209
Name	Address	Telephone #	
Operator in Responsible Charge (ORC)	Scott Moore	3220 Patton Way, Bakersfield CA	661-323-5115
Person that collected TC samples if different than ORC	Steve Horst/ Audrey Lewis	3220 Patton Way, Bakersfield CA	661-323-5115
Owner	Waymond Howze	19066 Beech Avenue, Shafter, CA	661-746-3460
Certified Laboratory for Microbiological Analyses	BC Labs	4100 Atlas Ct, Bakersfield CA	800-878-4911
Date Investigation Completed:	18 March 2015		
Month(s) of Total Coliform MCL Failure:	2		

INVESTIGATION DETAILS

SOURCE	WELL (name)	WELL (name)	WELL (name)	WELL (name)	COMMENTS
	Well 1				
1. Inspect each well head for physical defects and report					
a. Is raw water sample tap upstream from point of disinfection?	No				Well 2 is inactive
b. Is wellhead vent pipe screened?	Yes				
c. Is wellhead seal watertight?	Yes				
d. Is well head located in pit or is any piping from the wellhead submerged?	No				
e. Does the ground surface slope towards well head?	No				
f. Is there evidence of standing water near the wellhead?	No				
g. Are there any connections to the raw water piping that could be cross connections? (describe all connections in comments)	No				
h. Is the wellhead secured to prevent unauthorized access?	Yes				
i. To what treatment plant (name) does this well pump?	N/A				
j. How often do you take a raw water total coliform (TC) test?	After routine TC positive				
k. Provide the date and result of the last TC test at this location	2/09/15 Absent				

MAR 28 2015

DIVISION OF DRINKING WATER
REGULATORY SERVICES

POSITIVE TOTAL COLIFORM INVESTIGATION

Page 2 of 4

DISTRIBUTION SYSTEM	SYSTEM RESPONSES
1. What is the minimum pressure you are maintaining in the distribution system?	35
2. Did pressure in the distribution system drop to less than 5 psi prior to experiencing the TCR positive finding.	No
3. Has the distribution system been worked on within the last week? (service taps, hydrant flushing, main breaks, main extensions, etc.) If yes, provide details.	No
4. Are there any signs of excavations near your distribution system not under the direct control of your maintenance staff?	No
5. Did you inspect your distribution system to check for mainline leaks? Do you or did you have a mainline leak?	Yes, no mainline leaks
6. If there was a mainline leak, when was it repaired?	N/A
7. On what date was the distribution system last flushed?	6 March 2015
8. Is there a written flushing procedure you can provide for our review?	No
9. Do you have an active cross connection control program?	Unknown
10. What is name and phone number of your Cross-Connection Control Program Coordinator?	
11. Is the review and testing of backflow prevention devices current?	
12. On what date was the last physical survey of the system done to identify cross-connections?	

SAMPLE SITE EVALUATION (Complete for all TC+ or EC+ findings)	9483 Enos Ln.	9521 Enos Ln.	9309 Enos Ln.	9483 Enos Ln.	9474 Enos Ln.	31110 7 th Standard Rd.
1. What is the height of the sample tap above grade? (inches)	18' to 36'	18' to 36'	18' to 36'	18' to 36'	18' to 36'	18' to 36'
2. Is the sample tap located in an exterior location or is it protected by an enclosure?	ext	ext	ext	ext	ext	ext
3. Is the sample tap threaded, have a swing arm (kitchen sink) or aerator (sinks)?	Threaded	Threaded	Threaded	Threaded	Threaded	Threaded
4. Is the sample tap in good condition, free of leaks around the stem or packing?	Yes	Yes	Yes	Yes	Yes	Yes
5. Can the sample tap be adjusted to the point where a good laminar flow can be achieved without excessive splash?	Yes	Yes	Yes	Yes	Yes	Yes
6. Is the sample tap and area around the sample tap clean and dry (free of animal droppings, other contaminants or spray irrigation systems)	Yes	Yes	Yes	Yes	Yes	Yes
7. Is the area around the sample tap free of excessive vegetation or other impediments to sample collection	Yes	Yes	Yes	Yes	Yes	Yes
8. Describe how the tap was treated in preparation for sample collection (ran water, swabbed with disinfectant, flamed, etc.)	Swabbed	Swabbed	Swabbed	Swabbed	Swabbed	Swabbed
9. Is this sample tap designated on the sampling plan submitted with	Yes	Yes	Yes	Yes	Yes	Yes

POSITIVE TOTAL COLIFORM INVESTIGATION

Page 3 of 4

SAMPLE SITE EVALUATION (Complete for all TC+ or EC+ findings)		9483 Enos Ln.	9521 Enos Ln.	9309 Enos Ln.	9483 Enos Ln.	9474 Enos Ln.	31110 7 th Standard Rd.
this information request?							
10. What were the weather conditions at the time of the positive sample (rainy, windy, sunny)?		Sunny	Sunny	Sunny	Sunny	Sunny	Sunny

GENERAL OPERATIONS:	Response
1. Where there any power outages that affected water system facilities during the 30 days prior to the TC+ or EC + findings?	No
2. Where there any main breaks, water outages, or low pressure reported in the service area where TC+ or EC+ samples were located.	No
3. Does the system have backup power or elevated storage?	No
4. During or soon after bacteriological quality problems, did you receive any complaints of any customers' illness suspected of being waterborne? How many?	No
5. What were the symptoms of illness if you received complaints about customers being sick?	N/A

ADDITIONAL INFORMATION TO BE SUBMITTED WITH RESPONSES TO THE ABOVE QUESTIONS

1. Sketch of System showing all sources, treatment locations, storage tanks, microbiological sampling sites and general layout of the distribution system including the location of all hazardous connections such as the wastewater treatment facility.
2. A set of photographs of the well, pressure tanks, and storage tanks in the system may be submitted if they would show that the contamination is directly related and changes have been made since the last inspection by our Department
3. Name, certification level and certificate number of the Operator in Responsible Charge.
4. Copy of the last cross connection survey performed that identifies the location of all unprotected cross connections.

SUMMARY: BASED ON THE RESULTS OF YOUR INVESTIGATION AND ANY OTHER INFORMATION AT YOUR DISPOSAL, WHAT DO YOU BELIEVE TO BE THE CAUSE OF THE POSITIVE TOTAL COLIFORM SAMPLES FROM YOUR PUBLIC WATER SYSTEM?

Based on the results of the investigation and inspection of the system, it is possible that a source of contamination may have contributed to the positive Total Coliform samples from the booster pump at the storage tank. Please see attached pictures.

POSITIVE TOTAL COLIFORM INVESTIGATION

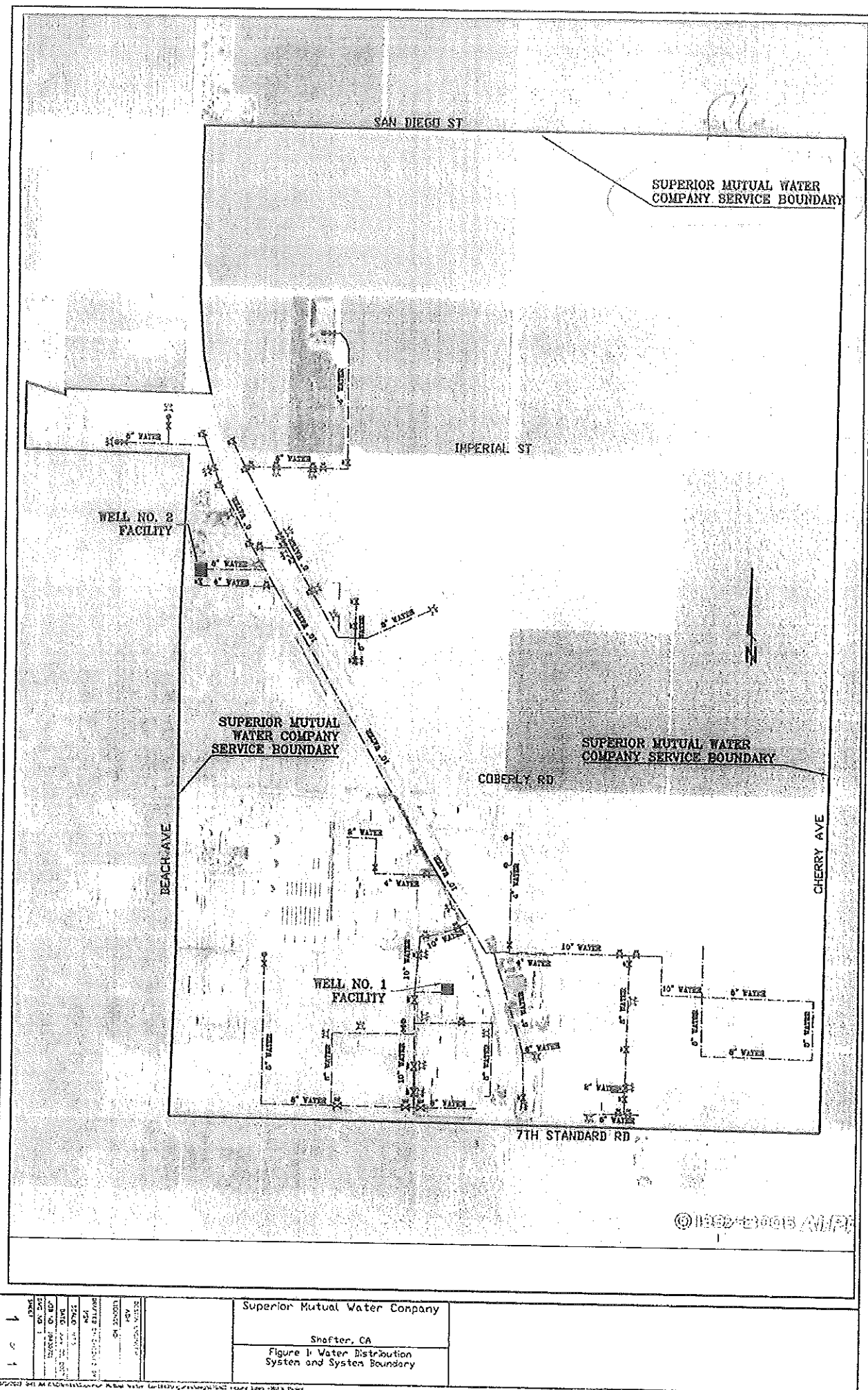
Page 4 of 4

CERTIFICATION: I CERTIFY THAT THE INFORMATION SUBMITTED IN RESPONSE TO THE QUESTIONS ABOVE IS ACCURATE TO THE BEST OF MY PROFESSIONAL KNOWLEDGE

NAME: [Signature]

TITLE: OPERATOR

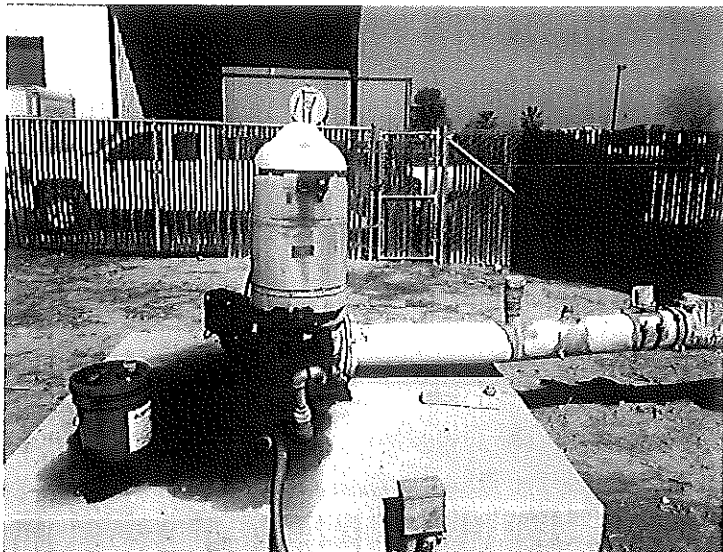
DATE: 20 MAR 15



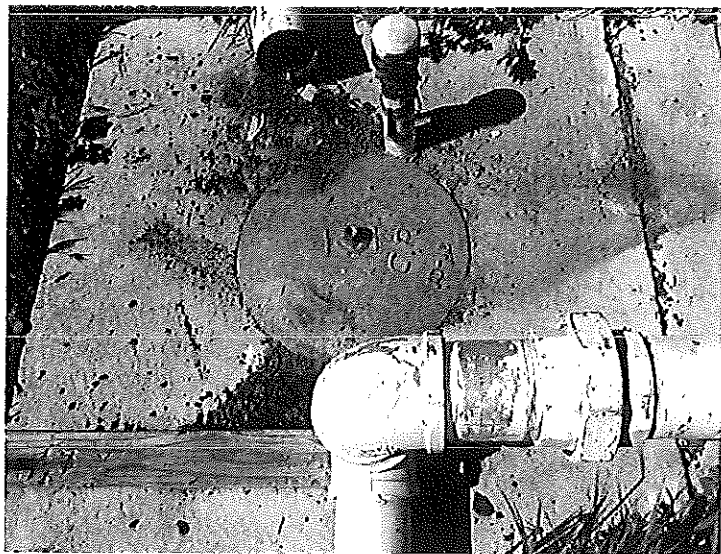
1	SHEET NO. 1 OF 1 DATE: 01/01/01 DRAWN BY: [illegible] CHECKED BY: [illegible] DESIGNED BY: [illegible] APPROVED BY: [illegible]	Superior Mutual Water Company Shafter, CA Figure 1: Water Distribution System and System Boundary
---	---	---

1503209 Superior MWC – Well pics as of 3/6/15 from Seaco Technologies

Below is Well 01 – pumps into 100,000 gallon storage tank and then to the system.



Well 02 is below. Pump pulled about 2 months ago. Updated SDWIS to inactive status. System will need to submit permit amendment application to reactivate. - lr



Source Bacteriological Monitoring Report

1503209 Superior Mutual Water Company

<i>Sample Date</i>	<i>Time</i>	<i>Source</i>	<i>Sample Type</i>	<i>Test Method</i>	<i>T Coli</i>	<i>E Coli</i>	<i>F Coli</i>	<i>HPC</i>	<i>Violation</i>	<i>Comments</i>
3/6/2015	11:15	Well 1	GWR Well	MPN	<1	<1				
2/9/2015	9:22	Well 1	GWR Well	P/A	A	A				

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Este informe contiene información muy importante sobre su agua potable.

Tradúzcalo o hable con alguien que lo entienda bien.

Superior Mutual Water Company Has Levels of Coliform Bacteria Above the Drinking Water Standard

Our water system recently failed a drinking water standard. Although this incident was not an emergency, as our customers, you have a right to know what you should do, what happened and what we did to correct this situation.

We routinely monitor for drinking water contaminants. We took 5 samples to test for the presence of coliform bacteria in March 2015. 5 of these samples showed the presence of total coliform bacteria. The standard is that no more than 1 sample per month may show the presence of coliform bacteria.

What should I do?

- **You do not need to boil your water or take other corrective actions.**
- This is not an emergency. If it had been, you would have been notified immediately. Total coliform bacteria are generally not harmful themselves. *Coliforms are bacteria which are naturally present in the environment and are used as an indicator that other, potentially-harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.*
- Usually, coliforms are a sign that there could be a problem with the treatment or distribution system (pipes). Whenever we detect coliform bacteria in any sample, we do follow-up testing to see if other bacteria of greater concern, such as fecal coliform or *E. coli*, are present. **We did not find any of these bacteria in our subsequent testing.**
- People with severely compromised immune systems, infants, and some elderly may be at increased risk. These people should seek advice about drinking water from their health care providers. General guidelines on ways to lessen the risk of infection by microbes are available from EPA's Safe Drinking Water Hotline at 1(800) 426-4791.
- If you have other health issues concerning the consumption of this water, you may wish to consult your doctor.

What happened? What is being done?

A disinfection of the entire system was done followed by flushing of the water mains. We anticipate resolving the problem within the next several days.

For more information, please contact Scott Moore at 661-213-7805 or at the following mailing address: 3220 Patton Way, Bakersfield, CA 93308

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this public notice in a public place or distributing copies by hand or mail.

Secondary Notification Requirements

Upon receipt of notification from a person operating a public water system, the following notification must be given within 10 days [Health and Safety Code Section 116450(g)]:

- **SCHOOLS:** Must notify school employees, students, and parents (if the students are minors).
- **RESIDENTIAL RENTAL PROPERTY OWNERS OR MANAGERS** (including nursing homes and care facilities): Must notify tenants.
- **BUSINESS PROPERTY OWNERS, MANAGERS, OR OPERATORS:** Must notify employees of businesses located on the property.

This notice is being sent to you by Superior MWC system.

RECEIVED

Date distributed: 9 March 2015.

MAR 13 2015

SWRCB - DDW
FRESNO FOB

PROOF OF NOTIFICATION
(Return with copy of the Notice)

As required by Section 116450 of the California Health and Safety Code, I notified all users of water supplied by the Superior Mutual Water Company (1503209) of the failure to meet the **total coliform bacteria MCL** for the month of March 2015 as directed by the Division. At least one primary distribution method is required: mail, hand-delivery or posting in conspicuous locations. A second method is also required in order to reach persons not likely to be reached by a mailing, direct delivery or posting:

Notification was made on 3-9-15
(date)

To summarize report delivery used and good-faith efforts taken please check all items below that apply and fill-in where appropriate:

- ☐ The notice was distributed by mail delivery to each customer served by the water system.
- ☒ The notice was distributed by direct delivery to each customer served by the water system. Specify direct delivery method(s) used: HAND DELIVERED
- ☐ Publication of the notice in a local newspaper or newsletter of general circulation (attach a copy of the published notice, including name of newspaper and date published).
- ☐ Posted the notice at the following conspicuous locations served by the water system (if needed, please attach a list of locations). _____
- ☐ Email message to employees or students. _____
- ☐ Other method used to notify customers. _____

DISCLOSURE: Be advised that Section 116725 and 116730 of the California Health and Safety Code state that any person who knowingly makes any false statement on any report or document submitted for the purpose of compliance with the attached order may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of violation, or be imprisoned in the county jail not to exceed one year, or by both the fine and imprisonment.

Certified by Name and Title: WAYMON HOWZE President
Date: 3-9-15 Signature: Waymon Howze

Due to the Division of Drinking Water within 10 days of notification to the public
Total Coliform MCL Failure / Enforcement Action No.: In progress

